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Image# 10930731069

# **FORM 3X**

FE6AN026

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

_	, , , , , , , , , , , , , , , , , , ,	For Other Than Ai	n Authorized	Committe	ee		Office Use Only	y
1.		USE FEC MAILING LA OR TYPE OR PRINT		nple:If typing: the lines	, type			
L	American College of Cardiolog	gy Political Action Comn	nittee 					
AD	DRESS (number and street)	2400 N St NW						
	Check if different							
L	than previously reported. (ACC)	Washington				DC	20037	
2.	FEC IDENTIFICATION NUM	BER ▼	CITY 🛕		S	TATE	ZIPC	ODE 🛦
	C00375360		3. IS THIS REPORT		N) OR	AI (A	MENDED A)	
4.	TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	X	May 20 (M5)	Aug	g 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:	Due on.	Mar 20 (M3)		Jun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15		Apr 20 (M4)		Jul 20 (M7)	Oct	20 (M10)	Jan 31 (YE)
	Quarterly Report(Q1	(c) 12-Day		Primary (12P	)	General	(12G)	Runoff (12R)
	July 15 Quarterly Report(Q2)	PRE-Elect	ion	Convention (12C)		]		,
	October 15 Quarterly Report(Q3	Report for (3)	the:	Convention (	120)	Special (	12G)	
	January 31 Quarterly Report(YE		Election on				in the State	
	July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day <b>Post</b> -Electric Report for		General (30G	a)	Runoff (3	30R)	Special (30S)
	Termination Report (TER)		Election on				in the State	
5.	Covering Period 0 4	01 20	1 0	through	0 4	30	2010	]
Ice	ertify that I have examined this R	eport and to the best of	my knowledge a	nd belief it is	true, correct a	nd complete.		
Тур	oe or Print Name of Treasurer	Carlton G. Davids						
Sig	nature of Treasurer Electron	ically Filed by Carlton	n G. Davids		Da	ate 0.5	19	2010
NO	TE : Submission of false, erron	eous, or incomplete info	rmation may sub	ject the perso	on signing this	Report to the	e penalties of 2 l	J.S.C 437g.
	Office Use						FEC FOI	

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

American College of Cardiology Political Action Committee

D D <sup>®</sup>D 0 4 0 1 2010 0 4 3 0 2010 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 210549.96 January 1 (b) Cash on Hand at 309164.98 Begining of Reporting Period ..... 38988.65 254475.86 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 348153.63 465025.82 6(a) and 6(c) for Column B) ..... 44337.64 161209.83 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 303815.99 303815.99 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

2/39

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 39

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

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2010

Γο:

м м 0 4 D D D

Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	(other than loans) From: Is/Persons Other		
	itical Committees zed (use Schedule A)	31137.67	209367.02
(ii) Unite	emized	5651.17	39449.02
(iii) TOT Lines	AL (add s 11(a)(i) and (ii)	36788.84	248816.04
(b) Political I	Party Committees	0.00	0.00
(such as	PACs)ntributions (add Lines	0.00	0.00
	(b) and (c)) (Carry Line 33, page 5)	36788.84	248816.04
Transfers Fro     Party Commit	m Affiliated/Other tees	0.00	0.00
3. All Loans Rec	eived	0.00	0.00
	ents Received	0.00	0.00
(Refunds, Rel (Carry Totals 6. Refunds of Co	to Line 37, page 5)	2199.81	5659.82
	ndidates and Other	0.00	0.00
7. Other Federal (Dividends, In	Receipts terest, etc.)	0.00	0.00
8. Transfers fror	n Non-Federal and Levin Funds		
(a) Non-Feder (from Sch	ral Account nedule H3)	0.00	0.00
(b) Levin Fund	ds (from Schedule H5)	0.00	0.00
(c) Total Trans	sfer (add 18(a) and 18(b)).	0.00	0.00
	(add Lines 11(d), , 16, 17, and 18(c))	38988.65	254475.86
0. Total Federal f	Receipts 18(c) from Line 19)	38988.65	254475.86

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4/39

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	1837.64	5744.78
	Expenditures(c) Total Operating Expenditures	1637.04	3744.76
	(add 21(a)(i), (a)(ii) and (b))	1837.64	5744.78
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	42500.00	155000.00
24.	Independent Expenditure	0.00	0.00
25.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
17	Loans Made	0.00	0.00
28.	Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	465.05
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	465.05
	(add Lines 28(a), (b), and (c))		
9.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds		
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	44337.64	161209.83
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	44337.64	161209.83

### **DETAILED SUMMARY PAGE**

of Disbursements

5 / 39

III. Net Contributions/Operating	COLUMN A	COLUMN B
Expenditures	Total This Period	Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	36788.84	248816.04
34. Total Contribution Refunds (from Line 28(d))	0.00	465.05
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36788.84	248350.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1837.64	5744.78
37. Offsets to Operating Expenditures (from Line 15, page 3)	2199.81	5659.82
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-362.17	84.96

FE6AN026

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	1	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Polit			
Full Name (Last, First, Middle Initial) Jay H. Alexander, M.D., F.A. Mailing Address 2256 Carlyle Court  City Buffalo Grove  FEC ID number of contributing federal political committee.  Name of Employer North Shore Cardiologists, SC Receipt For: Primary General Other (specify)	State IL  C  Occupation ADULT CAF  Aggregate Year	Zip Code 60089-4695 RDIOLOGY	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Eric R. Bates, M.D., F.A.  Mailing Address 840 Cherrystone Cou  City  Ann Arbor  FEC ID number of contributing federal political committee.  Name of Employer University of Michigan Hospitals and H  Receipt For:  Primary General  Other (specify)	State MI  C  Occupation	Zip Code 48105-3038  FIONAL CARDIOLOGY ar-to-Date ▼ 336.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 1 3 2 0 1 0  Transaction ID: 4F36BF67CF111C7C7  Amount of Each Receipt this Period  84.00
Full Name (Last, First, Middle Initial) George P. Bekic, D.O., F.A.  Mailing Address 502 Cherry Lane  City Lumberton  FEC ID number of contributing federal political committee.  Name of Employer Southeastern Cardiology, P.A.  Receipt For:  Primary General Other (specify)	State NC  C  Occupation CLINICAL C Aggregate Yea	Zip Code 28358-2350  CARDIOLOGY/GENERAL ar-to-Date ▼ 500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 2 3 2 0 1 0  Transaction ID: 66F7985C69B201570F  Amount of Each Receipt this Period  500.00  CARDIOLOGY
SUBTOTAL of Receipts This Page (optional)			784.00

SCHEDULE A (FEC Form	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 7/39 (check only one)  X 11a 11b 11c 12 15 16 17		
Any information copied from such Report or for commercial purposes, other than NAME OF COMMITTEE (In Full)  American College of Cardiology			n for the purpose of soliciting contributions solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) Ralph G. Brindis, M.D., M.P.			Date of Receipt		
Mailing Address 1410 Monterey  City  San Francisco	State Zip	o Code 1127-2554	Transaction ID: 4AD09433D60E7006A7  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1 1 1	100.00		
Name of Employer Oakland Kaiser Medical Center Receipt For:  Primary General Other (specify) ▼	Occupation INTERVENTION Aggregate Year-to	NAL CARDIOLOGY b-Date ▼ 300.00			
Alan S. Brown, M.D., F.A.	Full Name (Last, First, Middle Initial) Alan S. Brown, M.D., F.A. Mailing Address 1912 Alta Vista Court				
City	State Zip	o Code	0 4 3 0 2 0 1 0  Transaction ID: 4E4CA10A3385EDAB15		
<u>Naperville</u>	<u>IL</u> 60	0563	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		100.00		
Name of Employer Midwest Heart Specialists- Edward Heart	Occupation ADULT CARDIO				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	400.00			
Full Name (Last, First, Middle Initial) Joseph G. Cacchione, M.D., F.A.					
Mailing Address 5740 Hickory F	Mailing Address 5740 Hickory Knoll Court				
City	•	Code	Transaction ID: 4EB399AD3D6B1EEE1		
Fairview  FEC ID number of contributing federal political committee.	PA 16	6415-3246	Amount of Each Receipt this Period  84.00		
Name of Employer Cleveland Clinic	Occupation ADULT CARDIO	OLOGY			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	o-Date ▼ 252.00			
	tional)		284.00		

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 8 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \	Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Cardiology Pol			
<b>A</b> .	Full Name (Last, First, Middle Initial) Hollace D. Chastain, II, M.D., Mailing Address 1819 Breamar Drive  City Fort Wayne  FEC ID number of contributing federal political committee.  Name of Employer Fort Wayne Cardiology  Receipt For:  Primary General Other (specify)	State Zi <sub>l</sub>		Date of Receipt  M M M / B B / Y Y Y Y Y Y  O 4 3 0 2 0 1 0  Transaction ID: 4811B5EC2C1C281CED2  Amount of Each Receipt this Period  100.00
— В.	Full Name (Last, First, Middle Initial) Russell A. Ciafone, M.D., F.A.  Mailing Address 66 Highridge Road  City  West Simsbury  FEC ID number of contributing federal political committee.  Name of Employer Central Connecticut Cardiologists, LLC  Receipt For:  Primary General Other (specify)			Date of Receipt  M M M / 26
 C.	Full Name (Last, First, Middle Initial) Michael P. Cinquegrani, M.D., F.A.  Mailing Address 14755 Ridgemoor D  City Elm Grove  FEC ID number of contributing federal political committee.  Name of Employer Medical College of Wisconsin  Receipt For:  Primary General Other (specify)	State Zij WI 50	o Code 8122-1135  NAL CARDIOLOGY 0-Date ▼ 1000.00	Date of Receipt  M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
┝	SUBTOTAL of Receipts This Page (optional	,		1600.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9/39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politic	e name and ad	dress of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) Benjamin S. Citrin, M.D., F.A.  Mailing Address 4451 Suzanne Circle  City Mobile  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)		Zip Code 36608-2244  On CARDIOLOGY e Year-to-Date  250.00	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) David J. Clardy, M.D., F.A.  Mailing Address 801 Broadway N  City Fargo  FEC ID number of contributing federal political committee.  Name of Employer Meritcare Medical Center  Receipt For: Primary General Other (specify)		Zip Code 58102-3641	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
С.	Full Name (Last, First, Middle Initial) Michael M. Dehning, M.D., F.A.  Mailing Address 6826 Northland Drive  City  Omaha  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For:  Primary  General  Other (specify)	<del>, '</del>	Zip Code 68152-1064 on CARDIOLOGY e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y  Transaction ID: 9B5F41FF3C7F2B8C4B6  Amount of Each Receipt this Period  500.00
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number			834.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 39 (check only one)  X 11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Cardiology Pol	d Statements may not be sold or used by any person the name and address of any political committee to litical Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael G. DeVita, D.O., F.A.  Mailing Address 1640 Highway 88 St  City Brick  FEC ID number of contributing federal political committee.  Name of Employer Shore Cardiology Consultants  Receipt For:  Primary General Other (specify)	State Zip Code NJ 08724-3068  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date ▼  365.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Rodoljub Z. Dimitrijevic, M.D., F.A.  Mailing Address 3361 Chickering Lar  City Bloomfield Hills  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	State Zip Code MI 48302-1415  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 2 3 2 0 1 0  Transaction ID: 3332F62DC6C4D7CDAE:  Amount of Each Receipt this Period  1000.00
Full Name (Last, First, Middle Initial) Arthur Lee Eberly, III, M.D., Mailing Address PO Box 8795  City Greenville  FEC ID number of contributing federal political committee.  Name of Employer Carolina Cardiology  Receipt For: Primary General Other (specify)	State Zip Code SC 29604-8795  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional		1865.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 39 (check only one)    X
7	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politi	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) Ziad M. Elghoul, M.D., F.A. Mailing Address 2595 S Sean Drive  City Chandler  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed		ENTIONAL CARDIOLOGY	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial)  N. Rock Erekson  Mailing Address  2108 North Geyer Roc Suite 300  City  Frontenac  FEC ID number of contributing federal political committee.  Name of Employer Metro Heart Group of St. Louis, Inc.  Receipt For: Primary General Other (specify)	State MO C Occupatio ADMINIS	Zip Code 63131-3303 on STRATION e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 1 3 2 0 1 0  Transaction ID: 695502811570B43B96D  Amount of Each Receipt this Period  250.00
	Full Name (Last, First, Middle Initial) Chester J. Falterman, M.D., F.A.  Mailing Address 1458 Avellino Circle  City Murfreesboro  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	<del>, '</del>	Zip Code 37130-7608  n CARDIOLOGY e Year-to-Date  333.32	Date of Receipt  M M M / 25 / 2010  Transaction ID: 424DBA8CBD89339A4CF  Amount of Each Receipt this Period  83.33
	SUBTOTAL of Receipts This Page (optional) .	1		683.33

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 39 (check only one)  X 11a 11b 11c 12  13 14 15 16 17			
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American College of Cardiology F	and Statements may not be sold or used by any peng the name and address of any political committee				
Full Name (Last, First, Middle Initial) James W. Fasules, M.D., F.A. Mailing Address 6 Cascades Drive		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City <u>Little Rock</u> FEC ID number of contributing	State Zip Code AR 72212-3306	Transaction ID: 4BD183DA7856285BB0/ Amount of Each Receipt this Period			
Name of Employer American College of Cardiology Receipt For: Primary General Other (specify)	Occupation PEDIATRIC CARD.  Aggregate Year-to-Date ▼	84.00			
Full Name (Last, First, Middle Initial) Kevin Fitzpatrick  Mailing Address Heart House 2400 N Street No	Full Name (Last, First, Middle Initial) Kevin Fitzpatrick Mailing Address Heart House				
City  Washington  FEC ID number of contributing federal political committee.	State Zip Code DC 20037-1152  C	0 4 1 2 2 0 1 0  Transaction ID: 4558AC572E21A5076AE  Amount of Each Receipt this Period  84.00			
Name of Employer American College of Cardiology Receipt For:  Primary General Other (specify) ▼	Occupation ADMINISTRATION  Aggregate Year-to-Date   336.00				
Full Name (Last, First, Middle Initial) Kathleen B. Flood Mailing Address 9111 Old George	Kathleen B. Flood				
City  Bethesda  FEC ID number of contributing	State Zip Code MD 20814-1616	Transaction ID: 480FA6A17DE273FD4F  Amount of Each Receipt this Period  100.00			
Receipt For:  Primary  Other (specify)  General  Other (specify)  Page 1  Omittee.  Page 2  Receipt For:  General  Other (specify)  ▼	Occupation Executive  Aggregate Year-to-Date   400.00				
SUBTOTAL of Receipts This Page (option	nal)	268.00			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 39 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American College of Cardiology Pol	d Statements may not be sold or used by any personant the name and address of any political committee to itical Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lee W. Gould, M.D., F.A.  Mailing Address 3865 Country Club [  City Lewiston  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	Orive  State Zip Code ID 83501-9622  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date ▼  336.00	Date of Receipt  M M / D D / Y Y Y Y Y  O 4 2 0 1 0  Transaction ID: 438583E726B3F2E42FF8  Amount of Each Receipt this Period  84.00
Full Name (Last, First, Middle Initial) Frank A. Hobart, M.D., F.A. Mailing Address 2150 Shipyard Bould City Wilmington FEC ID number of contributing federal political committee.  Name of Employer Coastal Cardiology Associates, P.A. Receipt For: Primary General Other (specify)	State Zip Code NC 28403-8052  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: 4DC6D00DC64C22D5AD  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Robert E. Hobbs, M.D., F.A.  Mailing Address 2713 Dryden Road  City Beachwood  FEC ID number of contributing federal political committee.  Name of Employer Cleveland Clinic  Receipt For: Primary General Other (specify)	State Zip Code OH 44122  C Occupation HEART FAILURE/TRANSPLANT Aggregate Year-to-Date  250.02	Date of Receipt  M M / D D / Y Y Y Y Y Y  Transaction ID: 4722AA0ACE4899F07158  Amount of Each Receipt this Period  83.34
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line numb		667.34

	TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 14/39   (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politic	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) Chad A. Hoyt, M.D., F.A.  Mailing Address 1829 Parkland Drive			Date of Receipt
	City Lynchburg FEC ID number of contributing	State VA	Zip Code 24503-2420	Transaction ID: 93CF4F4B1B7F9465B09  Amount of Each Receipt this Period  250.00
	Name of Employer Cardiology Associates of Central Virgi Receipt For:  Primary  General  Other (specify) ▼	Occupatio ADULT (	n CARDIOLOGY e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Michael L. Isaacson, M.D., F.A.  Mailing Address 410 Mallard Drive			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City  Jonesboro  FEC ID number of contributing federal political committee.	State AR	Zip Code 72401-7138	Transaction ID: 028B413B562214EC0C7  Amount of Each Receipt this Period  1000.00
	Name of Employer Northeast Arkansas Clinic  Receipt For: Primary General Other (specify)	, '	n CARDIOLOGY e Year-to-Date ▼ 1000.00	]
С.	Full Name (Last, First, Middle Initial) Dipti Itchhaporia, M.D., F.A.  Mailing Address 355 Placentia Avenue			Date of Receipt  0 4 0 5 2 0 1 0
	City  Newport Beach  FEC ID number of contributing federal political committee.	State CA	Zip Code 92663-3311	Transaction ID: 3EA69B161A36AC92812 Amount of Each Receipt this Period 2500.00
	Name of Employer Self-Employed	Occupatio ADULT (	n CARDIOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2500.00	
	SUBTOTAL of Receipts This Page (optional)			3750.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than use NAME OF COMMITTEE (In Full)  American College of Cardiology	s and Statements may not be sold or used by any personal the name and address of any political committee to Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert S. Iwaoka, M.D., F.A.  Mailing Address 7342 Governors  City Charlotte  FEC ID number of contributing federal political committee.  Name of Employer Mid Carolina Cardiology  Receipt For: Primary General Other (specify)	State Zip Code NC 28211-5016  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  250.00	Date of Receipt  M M / 26 / 2010  Transaction ID: F0A61F7BACB48CD744  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Ennis James  Mailing Address 106 Fair Oaks Li  City Greenwood  FEC ID number of contributing federal political committee.  Name of Employer American College of Cardiology Receipt For: Primary General Other (specify)	State Zip Code SC 29646-9273  C  Occupation Executive  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Sujith Kalathiveetil, M.D.  Mailing Address 910 Lilac Lane Suite #212  City Naperville  FEC ID number of contributing federal political committee.  Name of Employer Cardiovascular Consultants of Napervil Receipt For: Primary Other (specify)	State Zip Code IL 60540-7235  C  Occupation INVASIVE CARDIOLOGY  Aggregate Year-to-Date   365.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (opti	onal)	1115.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politi	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mark W. Keller, M.D., F.A.  Mailing Address 5855 S Forest Street  City Greenwod Village  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	_	Zip Code 80121-2142  CARDIOLOGY Year-to-Date  1000.00	Date of Receipt  M M Z 26 Z 0 1 0  Transaction ID: 2E16E0D93FCFCFD14A  Amount of Each Receipt this Period  1000.00
- В.	Full Name (Last, First, Middle Initial) Roger Kerzner, M.D.  Mailing Address 252 Chapman Road S  City  Newark  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For:  Primary General Other (specify)	State DE  C  Occupation ELECTRO	Zip Code 19702-5438  DOPHYSIOLOGY Year-to-Date ▼ 250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ c.	Full Name (Last, First, Middle Initial) Timothy David Logan, D.O.  Mailing Address 21608 Englehardt Stre  City Saint Clair Shores  FEC ID number of contributing federal political committee.  Name of Employer Mount Clemens General Hospital  Receipt For: Primary General Other (specify)	State MI  C  Occupation INTERVE	Zip Code 48080-2928 TENTIONAL CARDIOLOGY Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y  O 4 2 3 2 0 1 0  Transaction ID: 3ADF559B33E337D1428  Amount of Each Receipt this Period  250.00
	SUBTOTAL of Receipts This Page (optional) .		<b>]</b>	1500.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 17/39   (check only one)
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Polit	e name and ad	dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) James B. McClurken, M.D., F.A.			Date of Receipt
	Mailing Address Department of Cardic 3401 N Broad Street City	othoracic Surg	ge Zip Code	0 4 0 5 2 0 1 0 Transaction ID: 6621035FBCA3A4861EA
	Philadelphia	PA	19140-5103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13140 3100	500.00
	Name of Employer Temple University Hospital	Occupatio CARDIO	n VASC. SURG.	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Clyde R. Meckel, M.D., F.A.  Mailing Address 6300 Sumner Street			Date of Receipt
	City	State	Zip Code	0 4 0 5 2 0 1 0 Transaction ID: 8E7E6FE1F7A775E3B8A
	Lincoln	NE	68506-1537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Bryan LGH Heart Institute	Occupatio ADULT (	n CARDIOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 730.00	
С. С.	Full Name (Last, First, Middle Initial) Clyde R. Meckel, M.D., F.A.			Date of Receipt
	Mailing Address 6300 Sumner Street			04 05 2010
	City	State	Zip Code	Transaction ID: 8D1092A3C8BED592852
	Lincoln	NE	68506-1537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Bryan LGH Heart Institute		CARDIOLOGY	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		730.00	
	SUBTOTAL of Receipts This Page (optional)			1230.00
	TOTAL This Period (last page this line numbe	er only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18/39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and r for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American College of Cardiology Pol	Statements may not be sold or used by any pe the name and address of any political committee stical Action Committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) Albert B. Mercer, M.D., F.A.  Mailing Address 1120 Griffith Avenue  City  Owensboro  FEC ID number of contributing federal political committee.  Name of Employer Green River Heart Institute  Receipt For:  Primary General  Other (specify)	State Zip Code KY 42301-2812  C  Occupation INTERVENTIONAL CARDIOLOGY Aggregate Year-to-Date  300.00	Date of Receipt  M M M / 25 / 2010  Transaction ID: 430890715F476CAB792  Amount of Each Receipt this Period  100.00
	Full Name (Last, First, Middle Initial) J. Scott Millikan, M.D., F.A.  Mailing Address 3319 Alpine Drive  City Billings  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	State Zip Code MT 59102-0341  C  Occupation CARDIOVASC. SURG.  Aggregate Year-to-Date   1000.00	Date of Receipt  M M C 26 2010  Transaction ID: 5E8A05CBB1744037DE6  Amount of Each Receipt this Period  1000.00
	Full Name (Last, First, Middle Initial) Margo B. Minissian, ACNP-BC, M Mailing Address 444 S San Vicente E  City Los Angeles FEC ID number of contributing federal political committee.  Name of Employer Cedars Sinai Womens Heart Center Receipt For: Primary General Other (specify)	State Zip Code CA 90048-4174  C  Occupation PREVENTIVE CARDIOLOGY Aggregate Year-to-Date  252.00	Date of Receipt  M M M / 15 / 2010  Transaction ID: 4F9C8A4D8E66AF7A5D  Amount of Each Receipt this Period  84.00
[;	SUBTOTAL of Receipts This Page (optional)		1184.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 39 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American College of Cardiology Poli	Statements may not be sold or used by any person he name and address of any political committee to tical Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael J. Mirro, M.D., F.A.  Mailing Address 2005 Prestwick Lane  City Fort Wayne  FEC ID number of contributing federal political committee.  Name of Employer Fort Wayne Cardiology Corporation  Receipt For: Primary General Other (specify)	State Zip Code IN 46814-9317  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  400.00	Date of Receipt  M M M / B B / Y Y Y Y Y  O 4 3 0 2 0 1 0  Transaction ID: 47FDBC0421ADBE51F1  Amount of Each Receipt this Period  100.00
Full Name (Last, First, Middle Initial) Jaime Moriguchi, M.D., F.A. Mailing Address 7359 Rutherford Hill  City West Hills  FEC ID number of contributing federal political committee.  Name of Employer University Cardiovascular MedicalClini Receipt For: Primary General Other (specify)		Date of Receipt    M   M   23   2010   Transaction ID: EC8C079C3EEA9D477EI   Amount of Each Receipt this Period   365.00    CARDIOLOGY
Full Name (Last, First, Middle Initial) Navin C. Nanda, M.D., F.A.  Mailing Address 4240 Kennesaw Driv  City Birmingham  FEC ID number of contributing federal political committee.  Name of Employer University Hospital  Receipt For: Primary General Other (specify)	e  State Zip Code AL 35213-3310  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4
SUBTOTAL of Receipts This Page (optional)		965.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politi	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) Daniel J. Newton, M.D.  Mailing Address 2628 Pickerington Wa  City Hudson  FEC ID number of contributing federal political committee.  Name of Employer Northeast Ohio Cardiovascular Speciali Receipt For:  Primary General Other (specify)	State OH C Occupation INTERVE	Zip Code 44236-4921  n ENTIONAL CARDIOLOGY Year-to-Date ▼ 250.00	Date of Receipt  M M M O D D O D O D O D O D O D O D O D
В.	Full Name (Last, First, Middle Initial) Paul J. O'Brien, M.D., F.A.  Mailing Address 4660 Kenmore Avenu  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer Virginia Cardiology, P.C.  Receipt For: Primary General Other (specify)	State VA  C  Occupation ADULT C	Zip Code 22304-1300  n CARDIOLOGY Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 1 9 2 0 1 0  Transaction ID: 47D8A24A15E5A3F1E2E  Amount of Each Receipt this Period  84.00
С.	Full Name (Last, First, Middle Initial) Charles D. O'Shaughnessy, M.D., F.A. Mailing Address 32411 Nottingham Dr  City Avon Lake  FEC ID number of contributing federal political committee.  Name of Employer North Ohio Heart Center  Receipt For: Primary General Other (specify)	State OH C Occupation INTERVE	Zip Code 44012-2192  n ENTIONAL CARDIOLOGY 2 Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 D D / Y Y Y Y Y  Transaction ID: AC8535D5D239E9B80D3  Amount of Each Receipt this Period  500.00
	SUBTOTAL of Receipts This Page (optional) .		<b> </b>	834.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 39 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Polit	Statements may not be sold or used by any personance and address of any political committee to ical Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Bruce Lee Palmer, M.D., F.A. Mailing Address 3500 Arena Road  City Wichita Falls  FEC ID number of contributing federal political committee.  Name of Employer Wichita Heart and Vascular  Receipt For: Primary General Other (specify)	State Zip Code TX 76310-5122  C  Occupation INTERVENTIONAL CARDIOLOGY Aggregate Year-to-Date  365.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 1 3 2 0 1 0  Transaction ID: BEF54B3E535E28D68D4  Amount of Each Receipt this Period  365.00
Full Name (Last, First, Middle Initial) Himanshu M. Patel, M.D. Mailing Address 14 Forest Meadow Ro  City Rome  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   250.00	Date of Receipt  M M C D D C 2 D 1 0  Transaction ID: 7E51A240C95EAAC9950  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Prasad Venkata Rama Paturu, M.B.B.S., Mailing Address 10339 Sandbar Drive  City Irving  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	State Zip Code TX 75063-5421  C  Occupation CLINICAL CARDIOLOGY/GENERAL Aggregate Year-to-Date  365.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		980.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politics	ne name and ad	dress of any political committee to	on for the purpose of soliciting contributions
A.	Full Name (Last, First, Middle Initial) Carl J. Pepine, M.D., M.A. Mailing Address 6308 Southwest 37th	n Way		Date of Receipt    M
	City <u>Gainesville</u>	State FL	Zip Code 32608-5105	Transaction ID: F3158BAC77A561956F7 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Shands Hospital at University of Flori Receipt For:  Primary  Other (specify) ▼		on CARDIOLOGY e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Francisco Perez, M.D.  Mailing Address PO Box 362241	1		Date of Receipt  O 4 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: 52C0A78393B42875B85
	San Juan	Se	00936-2241	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer The Arrhythmia Group	Occupation ELECTR	on ROPHYSIOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 365.00	
С.	Full Name (Last, First, Middle Initial)  Mahboobur Rahman, M.D., F.A.  Mailing Address 243 North Road # 24	An		Date of Receipt  O 4 2 3 2 0 1 0
	City	State	Zip Code	Transaction ID: 7586D6EDD9DA266BC3
	Poughkeepsie  FEC ID number of contributing federal political committee.	C	12601	Amount of Each Receipt this Period  500.00
	Name of Employer Self-Employed	Occupation ADULT (	on CARDIOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	1		1365.00
Ī	TOTAL This Period (last page this line number	er only)	I	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politi			son for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Thomas F. Rizzo, M.D., F.A. Mailing Address 203 Hillcrest Avenue City	State	Zip Code	Date of Receipt    M   M   D   D   7   Y   Y   Y   Y   Y   Y   Y   Y   Y
	Tinton Falls  FEC ID number of contributing federal political committee.	NJ C	07753-5730	Amount of Each Receipt this Period  365.00
	Name of Employer Self-Employed  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	1	on CARDIOLOGY e Year-to-Date ▼ 365.00	
- В.	Full Name (Last, First, Middle Initial) John F. Robb, M.D., F.A.  Mailing Address 9 Woodcock Lane			Date of Receipt  0 4 2 3 2 0 1 0
	City	State	Zip Code	Transaction ID: 34963D8BD186F25C2F
	Etna FEC ID number of contributing federal political committee.	C	03750-4403	Amount of Each Receipt this Period  250.00
	Name of Employer Dartmouth-Hitchcock Medcl Ctr Receipt For:  Primary General Other (specify) ▼		CARDIOLOGY e Year-to-Date ▼ 250.00	
- C.	Full Name (Last, First, Middle Initial) Luis F. Rodriguez-Ospina, M.D., F.A.			Date of Receipt
	Mailing Address Alturas De Torrimar Street 2 Blk 6 #10			0 4 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: FD3489D7F70AF33AE6
	Guaynabo  FEC ID number of contributing federal political committee.	PR	00969	Amount of Each Receipt this Period  250.00
	Name of Employer VA Caribbean Healthcare System Receipt For: Primary General	<del>, '</del>	CARDIOLOGY e Year-to-Date ▼	
-	Other (specify)		250.00	
	SUBTOTAL of Receipts This Page (optional) .			865.00
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American College of Cardiology P	and Statements may not be sold or used by any persong the name and address of any political committee to olitical Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Florence G. Rothenberg, M.D., F.A.  Mailing Address 222 Reily Road  City Cincinnati  FEC ID number of contributing federal political committee.  Name of Employer University of Cincinnati  Receipt For: Primary General Other (specify)	State Zip Code OH 45215  C  Occupation CARDIOVASCULAR RESEARCH Aggregate Year-to-Date  336.00	Date of Receipt  M M M / 25 / 2010  Transaction ID: 49C9A4BCF84B571A969  Amount of Each Receipt this Period  84.00
Full Name (Last, First, Middle Initial) John A. Rousou, M.D., F.A. Mailing Address 759 Chestnut Stree  City Springfield  FEC ID number of contributing federal political committee.  Name of Employer Baystate Medical Center  Receipt For: Primary General Other (specify)	State Zip Code MA 01107-1619  C  Occupation CARDIOVASC. SURG.  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 1 0  Transaction ID: 67B8B65E4489F545110  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) John S. Rumsfeld, M.D., Ph.D  Mailing Address Cardiology (111B) 1055 Clermont Str  City  Denver  FEC ID number of contributing federal political committee.  Name of Employer Denver VA Medical Center / University  Receipt For:  Primary General Other (specify)		Date of Receipt  M M / 25 / 2010  Transaction ID: 44F79937E2D1B6DEA7E  Amount of Each Receipt this Period  83.33
SUBTOTAL of Receipts This Page (option	al)	417.33

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)  American College of Cardiology	s and Statements may not be sold or used by any person ing the name and address of any political committee to Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Hani Mohammed Sabbour, M.B.B.S., Mailing Address 1451 Pound Hill  City North Smithfield  FEC ID number of contributing federal political committee.  Name of Employer Cardiology Associates, Inc. Receipt For: Primary Other (specify)	Road  State Zip Code RI 02896-9525  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  365.00	Date of Receipt  M M J D D J Z D 1 0  Transaction ID: AAC4960AC9572B9827  Amount of Each Receipt this Period  365.00
Full Name (Last, First, Middle Initial) Mehrdad Salamat, M.D., F.A. Mailing Address 3533 S Alameda  City Corpus Christi  FEC ID number of contributing federal political committee.  Name of Employer Drsicoll Physician Group  Receipt For: Primary General Other (specify)	Suite 202  State Zip Code TX 78411-1721  C  Occupation PEDIATRIC CARD.  Aggregate Year-to-Date  365.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 2 3 2 0 1 0  Transaction ID: CF86D1A4674F89E414  Amount of Each Receipt this Period  365.00
Full Name (Last, First, Middle Initial) Joseph J. Sarmiento, M.D., F.A.  Mailing Address 7324 W Country  City Bartonville  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	View Drive  State Zip Code IL 61607-9344  C  Occupation ELECTROPHYSIOLOGY  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 915BD597A6A62D874B  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (opti	onal)	980.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 39 (check only one)  X 11a 11b 11c 12 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American College of Cardiology Po	nd Statements may not be sold or used by any persor the name and address of any political committee to s litical Action Committee	of for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Srinivasa Dinakar Reddy Satti, M.D., F.A. Mailing Address 8440 Foxglove Average City Clinton FEC ID number of contributing federal political committee.  Name of Employer Aultan Hospital  Receipt For: Primary General Other (specify)	State Zip Code OH 44216  C  Occupation ELECTROPHYSIOLOGY  Aggregate Year-to-Date ▼  365.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  O 4 1 3 2 0 1 0  Transaction ID: 3984F139ABA071A85C  Amount of Each Receipt this Period  365.00
Full Name (Last, First, Middle Initial) John F. Schmedtje, Jr., M.D., Mailing Address 2619 Avenham Ave  City Roanoke  FEC ID number of contributing federal political committee.  Name of Employer Roanoke Heart Institute  Receipt For: Primary General Other (specify)	State Zip Code VA 24014-1506  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  1000.00	Date of Receipt  M M / 22 / 2010  Transaction ID: BEB58C94-431C-403A-  Amount of Each Receipt this Period  1000.00
Full Name (Last, First, Middle Initial) A. Allen Seals, M.D., F.A.  Mailing Address 113 Teal Pointe Lar  City  Ponte Vedra Beach  FEC ID number of contributing federal political committee.  Name of Employer Baker & Gilmour Crdvsclr Institute  Receipt For:  Primary General  Other (specify)	State Zip Code FL 32082-1936  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   1000.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: AB6B92F5275F873117  Amount of Each Receipt this Period  1000.00
SUBTOTAL of Receipts This Page (optional	ıl) <b>&gt;</b>	2365.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 39 (check only one)  X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American College of Cardiology Poli	Statements may not be sold or used by any person he name and address of any political committee to tical Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Michael J. Severino, M.D., F.A.  Mailing Address 1732 Fargo Bouleval Suite 100  City  Geneva  FEC ID number of contributing federal political committee.  Name of Employer Kane Cardiology, SC  Receipt For:  Primary General Other (specify)	State Zip Code IL 60134-2973  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  336.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 1 9 2 0 1 0  Transaction ID: 4BD6B3B2A69AFB47869  Amount of Each Receipt this Period  84.00
Full Name (Last, First, Middle Initial) Stanley J. Shin, M.D., F.A.  Mailing Address 368 Northside Dr. E  City Statesboro  FEC ID number of contributing federal political committee.  Name of Employer Statesboro Cardiology, PC. Receipt For:  Primary General Other (specify)	State Zip Code GA 30458-4839  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  250.00	Date of Receipt  M M M O D D O D O D O D O D O D O D O D
Full Name (Last, First, Middle Initial) John W. Shuck, M.D., F.A.  Mailing Address 1100 Forrest Avenue  City Dover  FEC ID number of contributing federal political committee.  Name of Employer Cardiology Consultants  Receipt For: Primary General Other (specify)	State Zip Code DE 19904-3309  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  252.00	Date of Receipt  M M C 25 2010  Transaction ID: 43EEABD1593662414E7  Amount of Each Receipt this Period  84.00
SUBTOTAL of Receipts This Page (optional)		418.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 39 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American College of Cardiology Poli	ne name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) M. Theodore Silver, M.D., F.A.  Mailing Address 697 Lebanon Road  City Winterport  FEC ID number of contributing federal political committee.  Name of Employer Northeast Cardiology Associates  Receipt For:  Primary General Other (specify)	<del> '</del>	Zip Code 04496-4023  on CARDIOLOGY e Year-to-Date ▼ 336.00	Date of Receipt  M M M / D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) Richard W. Snyder, M.D., F.A.  Mailing Address 5514 Yolanda  City  Dallas  FEC ID number of contributing federal political committee.  Name of Employer Heart Place  Receipt For:  Primary  General  Other (specify)		Zip Code 75229-6440	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 D D / 2 0 1 0  Transaction ID: 45F2A9B115ECD017DADE  Amount of Each Receipt this Period  250.00
c.	Full Name (Last, First, Middle Initial) Mark R. Sorensen, M.D., F.A.  Mailing Address 211 S Main Street #2  City Cape May Court Hou  FEC ID number of contributing federal political committee.  Name of Employer Cape Shore Cardiology  Receipt For:  Primary General Other (specify)	State NJ C Occupation ADULT	Zip Code 08210-2264  On CARDIOLOGY e Year-to-Date  333.32	Date of Receipt  M M M D D D Z 2 0 1 0  Transaction ID: 461D88255428E769EED6  Amount of Each Receipt this Period  83.33
	SUBTOTAL of Receipts This Page (optional)			417.33

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politic	e name and address of any political committee	son for the purpose of soliciting contributions
<b>A</b> .	Full Name (Last, First, Middle Initial) Randeep Suneja, M.B.B.S., Mailing Address 3002 Fair Dawn Court  City  Katy  FEC ID number of contributing federal political committee.  Name of Employer Cardiology Ctr of Houston  Receipt For:  Primary General  Other (specify)	State Zip Code TX 77450-8638  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date ▼	Date of Receipt  M M J D D D Z D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) Suma A. Thomas, M.D., F.A.  Mailing Address 7620 Old Georgetown  City  Bethesda  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For:  Primary General  Other (specify) ▼	Road, Apt. 121  State Zip Code MD 20814-6182  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  416.68	Date of Receipt  M M M / 19 2010  Transaction ID: 482FB4A642A1674E6A0F  Amount of Each Receipt this Period  208.34
<b>c</b> .	Full Name (Last, First, Middle Initial) Todd G. Tolbert, M.D.  Mailing Address 210 Heady Drive  City  Nashville  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For:  Primary General Other (specify)	State Zip Code TN 37205-4416  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   600.00	Date of Receipt  M M M / 08 / 2010  Transaction ID: 4AA4BA8810A44DC65C0  Amount of Each Receipt this Period  150.00
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		608.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Cardiology Politic	name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Paul L. Urban, M.D., F.A.  Mailing Address 2875 Southwest 53rd South 700  City Ocala  FEC ID number of contributing federal political committee.  Name of Employer Ocala Interventional CardiologyORMC Ca Receipt For:  Primary General Other (specify)	Street  State Zip Code FL 34471-9538  C  Occupation INTERVENTIONAL CARDIOLOGY Aggregate Year-to-Date  252.00	Date of Receipt  M M M / D D / Y Y Y Y Y  2 9 / 2 0 1 0  Transaction ID: 4EF0A160AD3B97886BA  Amount of Each Receipt this Period  84.00
Full Name (Last, First, Middle Initial) Krishnaswami Vijayaraghavan, M.B.B.S., Mailing Address 2817 E Ludlow Drive  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	State Zip Code AZ 85032-5665  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   336.00	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Howard T. Walpole, Jr., M.D., Mailing Address 31 Northumberland  City Nashville  FEC ID number of contributing federal political committee.  Name of Employer Saint Thomas Health Services Receipt For:  Primary General Other (specify)	State Zip Code TN 37215-4123  C  Occupation INTERVENTIONAL CARDIOLOGY Aggregate Year-to-Date  1000.00	Date of Receipt  O 4  O 5  Transaction ID: 4E5A9BDB0D4F459C96  Amount of Each Receipt this Period  500.00
SUBTOTAL of Receipts This Page (optional)	I	668.00

	CHEDULE A (FEC Form 3X EMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 31/39   (check only one)
Ar	y information copied from such Reports an for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Cardiology Po	the name and add	lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial)  Mary Norine Walsh, M.D., F.A.  Mailing Address 428 West 83rd Place  City  Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer The Care Group LLC  Receipt For:  Primary General  Other (specify)	State IN C Occupation HEART F	Zip Code 46260-4905  FAILURE/TRANSPLANT Year-to-Date  400.00	Date of Receipt  M M M / 29 / 2010  Transaction ID: 42AB89E2EA42E5037716  Amount of Each Receipt this Period  100.00
В.	Full Name (Last, First, Middle Initial) Sylvan Lee Weinberg, M.D., M.A.  Mailing Address 4555 Southern Boul  City Dayton  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	State OH C Occupation ADULT C	Zip Code 45429-1118  CARDIOLOGY  Year-to-Date ▼ 250.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4 1 3 2 0 1 0  Transaction ID: 6592465312B10A9B2DA  Amount of Each Receipt this Period  250.00
c.	Full Name (Last, First, Middle Initial) Steven R. West, M.D., F.A.  Mailing Address 2055 Thomasville F Apt. B304  City Tallahassee  FEC ID number of contributing federal political committee.  Name of Employer Capital Regional Medical Center (Colum Receipt For: Primary General Other (specify)	State FL  C  Occupation ADULT C	Zip Code 32308-0795  CARDIOLOGY Year-to-Date ▼ 400.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y  Transaction ID: 41BCA50DD32DA33B632  Amount of Each Receipt this Period  100.00
s	UBTOTAL of Receipts This Page (optiona	l)		450.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	
	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American College of Cardiology Poli	ne name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
<i>⊠</i> <b>A.</b>	Full Name (Last, First, Middle Initial) John Anthony Williams, III, M.D., Mailing Address 1001 Newman Road  City New Bern  FEC ID number of contributing federal political committee.  Name of Employer The Heart Center of Eastern Carolina Receipt For:  Primary General Other (specify)	State Zip Code NC 28562-5253  C Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  1000.0	
Б.	Full Name (Last, First, Middle Initial) Joseph S. Wilson, Jr., M.D.,  Mailing Address 755 Mount Vernon H  City Atlanta  FEC ID number of contributing federal political committee.  Name of Employer Cardiology of Georgia, PC. Receipt For:  Primary General Other (specify)	ighway Suite 530  State Zip Code GA 30328-4287  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date   400.0	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
_ C.	Full Name (Last, First, Middle Initial) Richard F. Wright, M.D., F.A.  Mailing Address 1038 South Carmelin  City  Los Angeles  FEC ID number of contributing federal political committee.  Name of Employer Pacific Heart Institute  Receipt For:  Primary General  Other (specify)	State Zip Code CA 90049  C  Occupation ADULT CARDIOLOGY  Aggregate Year-to-Date  950.0	Date of Receipt  M M M / D D / Y Y Y Y Y  O 4
	SUBTOTAL of Receipts This Page (optional)	•	1450.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 39 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	
American College of Cardiology Political	tical Action Committee	
Full Name (Last, First, Middle Initial) Lambert A. Wu, M.D., F.A.  Mailing Address 1524 Northwest Grov	ve Avenue	Date of Receipt
City Topeka	State Zip Code KS 66606-1234	Transaction ID: 4E638F7CCBEE541178  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer Cotton O'Neil Heart Center	Occupation ECHOCARDIOLOGY/ECHOCARDIO	OGRAPHY
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) Loran Yehudai, M.D., F.A.  Mailing Address 937 NW Glisan St Ap	ot 933	Date of Receipt
City	State Zip Code	0 4 0 2 2 0 1 0 Transaction ID: 6E1D3365-2033-4EB4-
Portland	OR 97209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer The Vancouver Clinic	Occupation INTERVENTIONAL CARDIOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Laura Leigh H. Younce, M.D., F.A.		Date of Receipt
Mailing Address 9809 Indian Trail-Fai	rview Road	04 13 7 2010
City <u>Indian Trail</u>	State Zip Code NC 28079-6768	Transaction ID: E6985AEB4FC8643DC
FEC ID number of contributing federal political committee.	NC 28079-6768	Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		1590.00

A.

### **SCHEDULE A (FEC Form 3X)**

FOR LINE NUMBER: PAGE 34/39 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Cardiology Political Action Committee Full Name (Last, First, Middle Initial) Don B. Ziperman, M.D., F.A. Date of Receipt Mailing Address 1400 N Ritter Avenue #500 0 4 23 2010 City State Zip Code Transaction ID: FC5CE5A2A6C292CFF4C Indianapolis IN 46219-3051 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Self-Employed Occupation **ADULT CARDIOLOGY** Receipt For: Aggregate Year-to-Date Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	<u>,</u>	31137.67

A.

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 39 (check only one)  11a 11b 11c 12 13 14 X 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American College of Cardiology Po	olitical Action Committee	
Full Name (Last, First, Middle Initial) American College of Cardiology - Admin Acc	count	Date of Receipt
Mailing Address P.O. Box 85024		0 4 2 0 2 0 1 0
City	State Zip Code	Transaction ID: DC8D3828115AF78BD44
Richmond	VA 23285-5024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2199.81
Name of Employer	Occupation	Reimburse. for March Amex and April Merchant Fees
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5659.82	

SUBTOTAL of Receipts This Page (optional)	•	2199.81
TOTAL This Period (last page this line number only)	<u> </u>	2199.81

S	SCHEDULE B (FEC Form 3X)			PAGE 36/39	
<u>ا</u>	TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag	CHECK OH	y one) 22 23 28a 28b	24 25 26 28c 29 30b
	ny Information copied from such Reports and Star for commercial purposes, other than using the n  NAME OF COMMITTEE (In Full)  American College of Cardiology Politica	ame and address of any politi			
A.	Full Name (Last, First, Middle Initial) American Express  Mailing Address PO Box 53852			Date of Disburse	V35E222555FD389F711D ement 0
	City Phoenix Purpose of Disbursement April Amex Fees Candidate Name	State Zip Code AZ 85072-385  ursement For: Primary General Other (specify)	001 Category/ Type	Amount of Each	Disbursement this Period 192.92
В.	Full Name (Last, First, Middle Initial) Wachovia Bank  Mailing Address C/O Nova Information 7300 Chapman Hwy  City Knoxville Purpose of Disbursement April Merchant Fees Candidate Name	State Zip Code TN 37920	001 Category/ Type	Date of Disburse	M03083EF66199B54238Cement  Dispursement this Period  1644.72
	Office Sought: House Disbution Senate President State: District:	orsement For:  Primary  Other (specify)  ▼			

SUBTOTAL of Disbursements This Page (optional)	•	1837.64
TOTAL This Period (last page this line number only)	•	1837.64

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full) American College of Cardiology Political Action Committee  Full Name (Last, First, Middle Initial) Citizens for Arlen Specter  Mailing Address 236 Massachusetts Avenue NE  City Washington  Purpose of Disbursement 2010 Primary Candidate Name Arlen Specter  Office Sought: House President  Disbursement For: 2010  Ramping Address 120 Maryland Ave NE  City Washington  Democratic Senatorial Campaign Committee  Mailing Address 120 Maryland Ave NE  City Washington  DC 20002  Purpose of Disbursement  Disbur	TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only		PAGE 37/39
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee    NAME OF COMMITTEE (In Full)   American College of Cardiology Political Action Committee    Full Name (Last, First, Middle Initial)   Citizens for Arlen Specter		Detailed Summary Page	27	28a 28b	28c 29 30b
American College of Cardiology Political Action Committee  Full Name (Last, First, Middle Initial) Citizens for Arlen Specter  Mailing Address 236 Massachusetts Avenue NE  City Washington  Purpose of Disbursement 2010 Primary Candidate Name Arlen Specter  Office Sought: House Disbursement For: 2010 Washington  State: PA District:  Full Name (Last, First, Middle Initial) City Democratic Senatorial Campaign Committee  Office Sought: House Disbursement District:  Full Name (Last, First, Middle Initial) Candidate Name Democratic Senatorial Campaign Committee  Office Sought: House Disbursement District:  Full Name (Last, First, Middle Initial) Candidate Name Democratic Senatorial Campaign Committee  Disbursement Disbursement District:  Full Name (Last, First, Middle Initial) Candidate Name Democratic Senatorial Campaign Committee  Office Sought: House Disbursement For: 2010 Contribution Candidate Name Democratic Senatorial Campaign Committee  Office Sought: House Disbursement For: 2010 Contribution  Category/ Type  Transaction ID: 306FD2309C6CDA Date of Disbursement Date of Disbursement this Perior  Amount of Each Disbursement this Perior Date of Disbursement Date of Date of Disbursement Date of Date					
Citizens for Arlen Specter  Mailing Address 236 Massachusetts Avenue NE  City State Zip Code Washington DC 20002  Purpose of Disbursement 2010 Primary Candidate Name Arlen Specter  Office Sought: House President President State: PA District:  City Sanate President State: PA District:  City Mashington DC 20002  Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee  City Washington DC 20002  Furpose of Disbursement 2010 Contribution Candidate Name Democratic Senatorial Campaign Committee  Office Sought: House President Disbursement For: 2010 Cardidate Name Democratic Senatorial Campaign Committee  Office Sought: House President State: President District:  Contribution Candidate Name Primary General Primary General Primary General Contribution  Cardidate Name Disbursement For: 2010 Contribution  City State: President District: Contribution  City Office Sought: House President State: Disbursement For: 2010 Des Moines IA 50304  Purpose of Disbursement 2010 Contribution  City State: Zip Code Des Moines IA 50304  Purpose of Disbursement 2010 Contribution  City State: Disbursement Category' Type  Office Sought: House President Cardidate Name Charles E. Grassley  Office Sought: House President Cardidate Name Charles E. Grassley  Office Sought: House President Cardidate Name Charles E. Grassley  Office Sought: House President Cardidate Name Charles E. Grassley  Office Sought: House President Cardidate Name Charles E. Grassley  Office Sought: House President Cardidate Name Charles E. Grassley  Office Sought: House President Cardidate Name Charles E. Grassley  Office Sought: House President Cardidate Name Charles E. Grassley  Office Sought: House President Cardidate Name Charles E. Grassley  Office Sought: Office Sought: Primary Cadency Primary	` '	l Action Committee			
City Washington  Purpose of Disbursement 2010 Primary Candidate Name Arian Specter  Office Sought: House   Disbursement For: 2010   Y primary   General President   Disbursement   Disbur					
Washington   DC   20002	Mailing Address 236 Massachusetts Av	venue NE		04 / 13	Y 2010 Y
Candidate Name Arlen Specter  Office Sought:				Amount of Each Dis	
Arlen Specter  Office Sought: House President State: PA District:  Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee  City State Zip Code Washington DC 20002  Purpose of Disbursement Democratic Senatorial Campaign Committee  Office Sought: House Disbursement Democratic Senatorial Campaign Committee  Office Sought: House Primary General Primary General Primary General State: District:  Full Name (Last, First, Middle Initial) DC 20002  Full Name (Last, First, Middle Initial) DC 20002  Full Name (Last, First, Middle Initial) Grassley Committee  Disbursement For: 2010 Senate Primary General National Primary Gen	2010 Primary				2500.00
State: PA   District:	Arlen Specter				
State: PA District:  Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee  Mailing Address 120 Maryland Ave NE  City State Zip Code Washington DC 20002 Purpose of Disbursement 2010 Contribution Candidate Name Democratic Senatorial Campaign Committee  Office Sought: House Senate Primary General Primary General National President In State: District: Contribution  Full Name (Last, First, Middle Initial) Grassley Committee Inc  Mailing Address PO Box 1000  City State Zip Code Disbursement For: 2010 Date of Disbursement  Mailing Address PO Box 1000  City Des Moines IA 50304  Purpose of Disbursement 2010 General Candidate Name Charles E. Grassley  Office Sought: House IS tate Zip Code Des Moines IA 50304  Purpose of Disbursement 2010 General Candidate Name Charles E. Grassley  Office Sought: House X Senate Primary X General Primary X General Candidate Name Charles E. Grassley  Office Sought: Y Senate Primary X General Other (specify) ▼  Office Sought: Y Senate Primary X General Other (specify) ▼	x Senate	X Primary General			
Democratic Senatorial Campaign Committee  Mailing Address 120 Maryland Ave NE  City State Zip Code Washington DC 20002  Purpose of Disbursement 2010 Contribution  Candidate Name Democratic Senatorial Campaign Committee  Office Sought: House Primary General Primary General National Address PO Box 1000  City Des Moines PO Box 1000  City State Zip Code Des Moines PO Box 1000  City Des Moines PO Box 1000  City Category/ Type  City Des Moines PO Box 1000  City Category/ Type  City Des Moines PO Box 1000  City State Zip Code Des Moines IA 50304  Purpose of Disbursement 2010 General Candidate Name Charles E. Grassley  Contribution  City State Zip Code Des Moines PO Box 1000  City Category/ Type  Category/ Type  Contribution  Category/ Type  Amount of Each Disbursement this Perior 2010 Category/ Type  Category/ Type  Contribution  City Category/ Type  City Category/ Type  City Category/ Type  Contribution  City Category/ Type  Contribution  City Category/ Type  Contribution  Category/ Typ					
Mailing Address 120 Maryland Ave NE  City State Zip Code 20002  Purpose of Disbursement 2010 Contribution  Candidate Name Democratic Senatorial Campaign Committee  Office Sought: House Primary General Primary General Primary General President  Mailing Address PO Box 1000  City State Zip Code Disbursement this Perior  Mailing Address PO Box 1000  Transaction ID: 1ECACDF46973DC Date of Disbursement  Mailing Address PO Box 1000  Transaction ID: 1ECACDF46973DC Date of Disbursement  Mailing Address PO Box 1000  Amount of Each Disbursement this Perior  Transaction ID: 1ECACDF46973DC Date of Disbursement  Date of Disbursement  Office Sought: Amount of Each Disbursement this Perior  Amount of Each Disbursement this Perior  Transaction ID: 1ECACDF46973DC Date of Disbursement this Perior  Office Sought: Amount of Each Disbursement this Perior  Office Sought: House Primary X General Other (specify) ▼  Office Sought: Assentate Primary X General Other (specify) ▼	,				
Washington DC 20002  Purpose of Disbursement 2010 Contribution  Candidate Name Democratic Senatorial Campaign Committee  Office Sought: House Senate Primary General Yother (specify) ▼  Contribution  Full Name (Last, First, Middle Initial) Grassley Committee Inc  Mailing Address PO Box 1000  City Des Moines IA 50304  Purpose of Disbursement 2010 General Candidate Name Charles E. Grassley  Office Sought: House Disbursement Tor: 2010 Amount of Each Disbursement this Period 2500.00  Disbursement Category/ Type  Office Sought: House Disbursement For: 2010 Category/ Type  Office Sought: House Primary X General Other (specify) ▼	Mailing Address 120 Maryland Ave NE		04 / 28	<sup>'</sup> 2010 <sup>'</sup>	
2010 Contribution  Candidate Name Democratic Senatorial Campaign Committee  Office Sought: House Senate Primary General Y Other (specify) ▼  Contribution  Full Name (Last, First, Middle Initial) Grassley Committee Inc  Mailing Address PO Box 1000  City State Zip Code Des Moines IA 50304  Purpose of Disbursement 2010 General Candidate Name Charles E. Grassley  Office Sought: House X Senate Primary X General Candidate Name Charles E. Grassley  Office Sought: House X Senate Primary X General Other (specify) ▼  Contribution  Transaction ID: 1ECACDF46973DC Date of Disbursement  Date of Disbursement To 2010  Amount of Each Disbursement this Perior 2500.00  2500.00				Amount of Each Dis	
Democratic Senatorial Campaign Committee  Office Sought: House Senate Primary General  Nother (specify) ▼  State: District: Contribution  Full Name (Last, First, Middle Initial) Grassley Committee Inc  Mailing Address PO Box 1000  City Des Moines IA 50304  Purpose of Disbursement 2010 General  Candidate Name Charles E. Grassley  Office Sought: House X Senate Primary X General  Other (specify) ▼  Other (specify) ▼  Transaction ID: 1ECACDF46973DC Date of Disbursement  M	2010 Contribution				15000.00
Senate President President  State:  District:  Contribution  Full Name (Last, First, Middle Initial) Grassley Committee Inc  Mailing Address PO Box 1000  City Des Moines Purpose of Disbursement 2010 General Candidate Name Charles E. Grassley  Office Sought:  House  X Other (specify)  Contribution  Transaction ID: 1ECACDF46973DC Date of Disbursement		nittee			
Full Name (Last, First, Middle Initial) Grassley Committee Inc  Mailing Address PO Box 1000  City State Zip Code Des Moines IA 50304  Purpose of Disbursement  Candidate Name Charles E. Grassley  Office Sought: House X Senate President  President  Transaction ID: 1ECACDF46973DC Date of Disbursement  M M M / D D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Senate President	Primary General  X Other (specify) ▼			
Grassley Committee Inc  Mailing Address PO Box 1000  City State Zip Code Des Moines IA 50304  Purpose of Disbursement 2010 General Candidate Name Charles E. Grassley  Office Sought: House X Senate Primary X General President  Date of Disbursement  0 1 1 3 / 2 0 1 0 Y  Amount of Each Disbursement this Perior  2500.00  Amount of Each Disbursement this Perior  2500.00		ribution			. F.O. A. O. D. F. 4.00 T.O. D. O. O.
City State Zip Code Des Moines IA 50304  Purpose of Disbursement 2010 General Candidate Name Charles E. Grassley  Office Sought: House X Senate Primary X General President  Other (specify)  Other (specify)  Other (specify)	,			Date of Disburseme	ent
Des Moines IA 50304  Purpose of Disbursement 2010 General 011  Candidate Name Charles E. Grassley Disbursement For: 2010  X Senate Primary X General Other (specify) ▼	Mailing Address PO Box 1000			0 4 1 3	2010
2010 General  Candidate Name Charles E. Grassley  Office Sought:    Disbursement For: 2010	Des Moines			Amount of Each Dis	• • • • • • •
Charles E. Grassley  Office Sought:    House   Disbursement For: 2010     X Senate   Primary   X General     President   Other (specify) ▼	2010 General				2500.00
X Senate Primary X General President Other (specify) ▼	Charles E. Grassley				
	x Senate	Primary X General			
Otate. In District.	State: IA District:	only (opening) \			

ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check on	ly one)	PAGE 38/39	
		Detailed Summary Page	21b 27	22 X 23 24 28a 28b 28c	25 26 29 30l	
	y Information copied from such Reports and Statem or commercial purposes, other than using the name					
$\rangle$	NAME OF COMMITTEE (In Full)  American College of Cardiology Political A	, , , ,				
<u>/</u>	Full Name (Last, First, Middle Initial) National Republican Senatorial Committee			Transaction ID: CC7D3	361AC9C5E5F1	
	Mailing Address 425 Second Street NE			0 4 D 2 8 Y	žoťo	
		State Zip Code DC 20002		Amount of Each Disburser		
	Purpose of Disbursement 2010 Contribution		011		15000.00	
	Candidate Name National Republican Senatorial Committee Office Sought: House Disburse	ment For: 2010	Category/ Type	-		
	Senate President X	Primary General Other (specify)				
	State: District: Contrib  Full Name (Last, First, Middle Initial)  Reed Committee	ution		Transaction ID: A8432 Date of Disbursement	B8B80426D66F	
	Mailing Address PO Box 8628			04 / 29 /	ž 0 Ĭ 0 Ÿ	
	City Cranston	State Zip Code RI 02920		Amount of Each Disburser		
2	Purpose of Disbursement 2014 Primary		011		2500.00	
	Candidate Name Jack Reed		Category/ Type			
		ment For: 2014 Primary General Other (specify)				
	Full Name (Last, First, Middle Initial) Robert Aderholt for Congress			Transaction ID: 36D56 Date of Disbursement		
	Mailing Address PO Box 1158			0 4 D 0 2 Y	ž 0 Ĭ 0 Š	
		State Zip Code AL 35565		Amount of Each Disburser		
	Purpose of Disbursement 2010 Primary		011		2500.00	
	Candidate Name Robert B. Aderholt		Category/ Type			
	Senate X President	ment For: 2010 Primary General Other (specify)				
	State: AL District: 04					

A.

SCHEDULE B (FEC Form 3X)		llse ser	Use separate schedule(s)			NUMBER:	PAGE 39/39
TEMIZED DISI	BURSEMENTS	for each	category of the Summary Page	(ch	eck only 21b 27	y one) 22 X 23 28a 28b	24 25 26 28c 29 30b
•	from such Reports and State ses, other than using the nar	•		, ,	•		ŭ
NAME OF COMMIT	ΓΤΕΕ (In Full)						
American Colleg	e of Cardiology Political	Action Cor	nmittee				
Full Name (Last, Fir	st, Middle Initial)					Transaction ID: /	ABFF1FB57A2B6B7926
Tiberi for Congre	ess					Date of Disburseme	
Mailing Address	2931 E Dublin Granville Suite 190	Road				04 15	Y ŽOĬOŸ
City Columbus		State OH	Zip Code 43231			Amount of Each Dis	sbursement this Period
Purpose of Disburse 2010 Primary	ement			01	1		2500.00
Candidate Name Pat Tiberi				Categ Typ	-		
Office Sought:	X	sement For: X Primary Other (sp	2010 General ecify)				
State: OH	District: 12		- * <b>*</b>				

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	2500.00
TOTAL This Period (last page this line number only)	<b>•</b>	42500.00